

# BEST AVAILABLE COPY

SIAL NUMBER 09/067,599	FILING DATE 04/28/98	CLASS 395	GROUP ART UNIT 2784	ATTORNEY DOCKET NO. RA998-007
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SAMUEL STEVEN ALLISON, FUQUAY-VARINA, NC; KENNETH JAMES BARKER, CARY, NC.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

*None/*

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

\_\_\_\_\_

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

*None/*

FOREIGN FILING LICENSE GRANTED 05/18/98

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NC	SHEETS DRAWING 13	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 3
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Verified and Acknowledged *✓* Examiner's Initials \_\_\_\_\_ Initials \_\_\_\_\_

ADDRESS

JOSCELYN G COCKBURN  
IBM CORPORATION 972/B656  
P O BOX 12195  
RESEARCH TRIANGLE PARK NC 27709

Cust. No. 25299

TITLE

~~NETWORK WAKE-UP~~ PATTERN MATCHING IN COMMUNICATIONS NETWORK

FILING FEE RECEIVED  \$1,060	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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#5



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1371

SERIAL NUMBER 09/067,599	FILING DATE 04/28/1998  RULE	CLASS XXX	GROUP ART UNIT 2177	ATTORNEY DOCKET NO. RA998-007
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## APPLICANTS

SAMUEL STEVEN ALLISON, FUQUAY-VARINA, NC;

KENNETH JAMES BARKER, CARY, NC;

\*\* CONTINUING DATA *none*\*\* FOREIGN APPLICATIONS *none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/18/1998

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NC	SHEETS DRAWING 13	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials		

## ADDRESS

25299

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## TITLE

PATTERN MATCHING IN COMMUNICATIONS NETWORK

FILING FEE  RECEIVED 1634	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____